



UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark Office  
Address: COMMISSIONER OF PATENTS AND TRADEMARK  
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO.
--------------------	-------------	-----------------------	---------------------

EXAMINER
----------

ART UNIT	PAPER NUMBER
----------	--------------

DATE MAILED:

### INTERVIEW SUMMARY

All participants (applicant, applicant's representative, PTO personnel):

(1) Hung Bui (3) Brian Genco  
(2) Andrew Christensen (4) \_\_\_\_\_

Date of Interview 3/1/04

Type: ☐ Telephonic ☐ Televideo Conference ☒ Personal (copy is given to ☐ applicant ☐ applicant's representative).

Exhibit shown or demonstration conducted: ☐ Yes ☒ No If yes, brief description: \_\_\_\_\_

Agreement ☒ was reached. ☐ was not reached.

Claim(s) discussed: Independant claims 15, 21, & 25

Identification of prior art discussed: Applicant's admitted prior art, Endsley

Description of the general nature of what was agreed to if an agreement was reached, or any other comments: \_\_\_\_\_

Should an exclusionary statement of ignoring or not extracting pixels of the other color be amended in the independant claims it would appear to overcome the prior art rejection presented.

(A fuller description, if necessary, and a copy of the amendments, if available, which the examiner agreed would render the claims allowable must be attached. Also, where no copy of the amendments which would render the claims allowable is available, a summary thereof must be attached.)

☒ It is not necessary for applicant to provide a separate record of the substance of the interview.

Unless the paragraph above has been checked to indicate to the contrary. A FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION IS NOT WAIVED AND MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has are ready been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW.

Examiner Note: You must sign this form unless it is an attachment to another form.

[Signature] 3/1/04